



07-19-00

GP 2773  
#

PTO/SB/21 (6-98)

Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/201,644
		Filing Date	November 30, 1998
		First Named Inventor	K. PABLA
		Group Art Unit	2773
		Examiner Name	S. SAX
Total Number of Pages in This Submission	12	Attorney Docket Number	83000.1076/P3674/AES

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### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
A REQUEST IS HEREBY MADE FOR A ONE MONTH EXTENSION ON RESPONSE TO OFFICE ACTION OF MARCH 17, 2000.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	The Hecker Law Group by Gary A. Hecker
Signature	
Date	July 17, 2000

### Express Mail

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date July 17, 2000

Typed or printed name Deanna Groover / Express Mail # EL582484791US

Signature

Date July 17, 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/17 (12/99)

Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# FEE TRANSMITTAL for FY 2000

*Patent fees are subject to annual revision.*

*Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.*

**TOTAL AMOUNT OF PAYMENT** (\$ 110.00)

## Complete if Known

Application Number	09/201,644
Filing Date	November 30, 1998
First Named Inventor	K. PABLA
Examiner Name	S. SAX
Group / Art Unit	2773
Attorney Docket No.	83000.1076/P3674/AES

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2.  Payment Enclosed:

Check  Money Order  Other

## FEE CALCULATION (continued)

### 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	690	201 345 Utility filing fee	<input type="text"/>
106	310	206 155 Design filing fee	<input type="text"/>
107	480	207 240 Plant filing fee	<input type="text"/>
108	690	208 345 Reissue filing fee	<input type="text"/>
114	150	214 75 Provisional filing fee	<input type="text"/>

**SUBTOTAL (1) (\$)** ---

### 2. EXTRA CLAIM FEES

Total Claims	-20** =	X	Fee from below	Fee Paid
Independent Claims	- 3*** =	X	<input type="text"/>	<input type="text"/>
Multiple Dependent	<input type="text"/>	X	<input type="text"/>	<input type="text"/>

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103	18	203 9 Claims in excess of 20	<input type="text"/>
102	78	202 39 Independent claims in excess of 3	<input type="text"/>
104	260	204 130 Multiple dependent claim, if not paid	<input type="text"/>
109	78	209 39 ** Reissue independent claims over original patent	<input type="text"/>
110	18	210 9 ** Reissue claims in excess of 20 and over original patent	<input type="text"/>

**SUBTOTAL (2) (\$)** ---

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	<input type="text"/>
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139 130 Non-English specification	<input type="text"/>
147	2,520	147 2,520 For filing a request for reexamination	<input type="text"/>
112	920*	112 920* Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215 55 Extension for reply within first month	<input type="text"/>
116	380	216 190 Extension for reply within second month	<input type="text"/>
117	870	217 435 Extension for reply within third month	<input type="text"/>
118	1,360	218 680 Extension for reply within fourth month	<input type="text"/>
128	1,850	228 925 Extension for reply within fifth month	<input type="text"/>
119	300	219 150 Notice of Appeal	<input type="text"/>
120	300	220 150 Filing a brief in support of an appeal	<input type="text"/>
121	260	221 130 Request for oral hearing	<input type="text"/>
138	1,510	138 1,510 Petition to institute a public use proceeding	<input type="text"/>
140	110	240 55 Petition to revive - unavoidable	<input type="text"/>
141	1,210	241 605 Petition to revive - unintentional	<input type="text"/>
142	1,210	242 605 Utility issue fee (or reissue)	<input type="text"/>
143	430	243 215 Design issue fee	<input type="text"/>
144	580	244 290 Plant issue fee	<input type="text"/>
122	130	122 130 Petitions to the Commissioner	<input type="text"/>
123	50	123 50 Petitions related to provisional applications	<input type="text"/>
126	240	126 240 Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581 40 Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	690	246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149	690	249 345 For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$)** 110.00

## SUBMITTED BY

Complete if applicable

Name (Print/Type)	Gary A. Heekee	Registration No. (Attorney/Agent)	31,023	Telephone	310-286-0377
Signature		Date	July 17, 2000		

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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CHECK REQUEST FORM

DATE: July 17, 2000



PAYABLE TO: ASSISTANT COMMISSIONER FOR PATENTS

ADDRESS: Assistant Commissioner for Patents and Trademarks  
Washington, D.C. 20231

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JUL 24 2000

TC 2700 MAIL ROOM

AMOUNT: \$110.00

DESCRIPTION: Fee for 1 month extension for filing a response for M/A  
FOR DETECTING DEVICE SUPPORT IN A GRAPHICAL USER  
INTERFACE

CLIENT NAME: SUN MICROSYSTEMS, INC.

G/L #: \_\_\_\_\_

CLIENT #: 83000.1076/P3674/AES

REQUESTED BY:  
A.S.A.P  
GAH/DC/dg

NEED BY: July 17, 2000